## November 28, 2012, Draft Minutes to be approved March 2013

## South Dakota Board of Medical and Osteopathic Examiners – Regular Board Meeting

Board Members Present: Mr. Patrick Burchill; Walter Carlson, MD; Mary

Carpenter, MD; Mr. Bernie Christenson; David Erickson, MD; Robert Ferrell, MD; Brent Lindbloom, DO; Jeffrey Murray, MD; James Reynolds, MD

Board Staff Present: Margaret Hansen, PA-C; Ms. Kristi Golden; Mr. Ted

Huss; Ms. Jane Phalen; Ms. Randi Sterling

Counsel Present: Roxanne Giedd, Board; William Golden, Staff

Dr. Robert Ferrell, President of the Board, called the meeting to order. Roll was called, a quorum was established.

A motion to accept the meeting agenda was approved (Mr. Burchill/Unanimous vote)

A motion to accept the September 12, 2012, meeting minutes was approved (Dr. Carlson/Unanimous vote)

A motion to accept the List of New Licenses, Permits, Certificates and Registrations issued between June 1 and August 31, 2012, was approved (Dr. Lindbloom/Unanimous vote)

The financial report was accepted for information

Ms. Marilyn Rutz, the new director of the Emergency Medical Services, was introduced to the Board.

Two nominations for the licensed nutritionist advisory committee were presented by board staff. Motions to accept the nomination of Ms. Nicole Reuswaat, LN, and Ms. Tanja Cutting, LN, were approved (Dr. Carpenter/Unanimous vote)

Ms.Kayla Tinker, SD Department of Health, presented a petition for a scope of practice expansion for an emergency medical technician paramedic. A motion to accept the expansion was approved (Dr. Carpenter/Unanimous vote)

A waiver request was received pursuant to SDCL 1. 36-4-17, 2. 36-4-11 and administrative rules Chapter 20:47:03:03, listed respectively below. Brian Leyland-Jones, MD, presented primary source verification of a board certification by an American Board of Medical Specialties (internal medicine and medical oncology) as well as primary source documentation of the records of the graduate medical education program (four contiguous accredited fellowships) that established the degree of

proficiency of the applicant's performance to the satisfaction of the Board. A motion to grant the waiver and issue the medical license was approved (Mr. Burchill/Unanimous vote)

- SDCL 1. 36-4-17 Written examination required--Discrimination between systems of medicine prohibited--Minimum grade--Reexamination--Fee--Preservation of grades. The examination required by this chapter shall be in writing. The questions on all subjects shall be such as are answered alike by all schools of medicine or osteopathy. No license may be refused any applicant because of adherence to any particular school of medicine. Each applicant shall be required to attain an average percentage of at least seventy-five percent of correct answers. Any applicant failing on such examination is eligible for a maximum of two subsequent examinations upon payment of the required fee at any regular meeting of the Board of Medical and Osteopathic Examiners or at such time and place as the board may designate. Before taking the examination, the applicant shall pay to the secretary of the board a fee to be set by the board in an amount not to exceed five hundred fifty dollars. The applicant must pass all parts or steps of the examination within seven years. However, if the applicant is board-certified by a board of the American Board of Medical Specialties, the Board of Medical and Osteopathic Examiners may waive this requirement. All grades achieved shall be preserved by the secretary of the board for a period of at least three years. (Emphasis supplied)
- SDCL 1. 36-4-11. Application for license--Qualifications of licensee--Examination--Educational requirements. Any person desiring to engage in the practice of medicine or osteopathy, surgery, or obstetrics in any of their branches in this state shall apply to the Board of Medical and Osteopathic Examiners for a license. The application shall contain such information as the board may require by rules adopted pursuant to chapter 1-26. The Board of Examiners shall grant a license to any applicant who gives satisfactory proof of being at least eighteen years of age and who is of good moral character if the applicant passes an examination, determined by the board by rule adopted pursuant to chapter 1-26, to establish medical competence and presents evidence of having graduated and received a diploma from a medical or osteopathic college approved by the board in accordance with rules adopted pursuant to chapter 1-26. If the diploma is from a medical or osteopathic college outside the United States, the Board of Examiners may require further proof of competence by rules adopted pursuant to chapter 1-26. The applicant shall also present evidence satisfactory to the board of successful completion of a program as an intern or resident, or of equivalent service approved by the board, in a hospital approved by the board, for such time as the board requires by rule adopted pursuant to chapter 1-26. (Emphasis supplied)
- Chapter 20:47:03:03. General application requirements. Applicants for licensure or renewal of licensure must fulfill the following requirements:

(11) If the applicant completed graduate medical education training after July 1, 1987, submit a certificate showing that the applicant has successfully completed a program of graduate medical education of at least two years through a hospital approved by the board. The records of the graduate medical education program must establish the degree of proficiency of the applicant's performance. Applicants who completed graduate medical education before July 1, 1987, must submit a certificate of internship or residency showing that the applicant has served not less than one year as an intern or resident in a hospital approved by the board or its equivalent; (Emphasis supplied).

The Board commended the board staff for exceptional performance in assisting applicants and licensees, and directed the staff to look into the list of acceptable post graduate medical programs.

The Executive Director informed the Board members of proposed legislation regarding the resident physician license, board website improvements, immunization administration document prepared by the SD Boards of Medicine and Nursing staffs, as well as several Federation of State Medical Boards (FSMB), initiatives including: Maintenance of Licensure (MOL); Framework for a Minimal Physician Data Set (MDS); State Board Sponsorship Role in USMLE Step 3; Draft - Model Policy on Opioid Addiction Treatment in the Medical Office; Draft – Model Policy on the Appropriate Use of Opioid Analgesics in the Treatment of Pain; and information on the date and location of the 2013 FSMB Annual Meeting.

An update was presented regarding the re-writing of application disclosure questions, and that feedback was requested and responses were received from all allied groups regulated by the Board. A motion to accept the re-written application disclosure questions was approved (Mr. Christenson/Unanimous vote)

Board Members do not vote on Board actions for their respective cases pursuant to administrative rule 20:78:05:05.:

Hearing procedure. Contested case hearings shall be conducted in accordance with SDCL 1-26. The parties to a hearing are the executive secretary and the applicant or licensee. A board member who has participated in any investigation of the matter before the board shall disqualify himself from all deliberations and decisions. (Emphasis supplied).

Dr. Annette Bosworth waived privilege, and a motion to accept the hearing examiner's Findings of Fact and Conclusions of Law resulting from her contested case was approved with the signing of written authorizations and releases and language in the order regarding monthly reports for Dr. Bosworth was approved (Dr. Carlson/Unanimous vote) Dr. Carpenter and Dr. Ferrell abstained. A motion to send a letter to the National Practitioner Data Bank that this board action ensures public safety

with Dr. Bosworth now in compliance with her agreement (Mr. Christenson/Unanimous vote) Dr. Carpenter and Dr. Ferrell abstained.

The physician did not waive privilege so the Board entered closed session per SDCL 36-4-31.5. The public meeting resumed. A motion to accept the Stipulation and Agreement and the Temporary Approval Order for Aaron Vasa, MD, was approved (Dr. Lindbloom/Unanimous vote) Dr. Carlson abstained

The physician did not waive privilege so the Board entered closed session per SDCL 36-4-31.5. The public meeting resumed. A motion to accept the hearing examiner's Findings of Fact and Conclusions of Law for the Dr. Alison McDonald applicant contested case was approved (Dr. Carpenter/Unanimous vote) Dr. Carlson abstained

A motion to accept the Consent Agreement with Reprimand and the Temporary Approval Order for Curt Hassart, EMT was approved (Dr. Lindbloom/Unanimous vote) Mr. Christenson abstained

A motion to accept the Consent Agreement with Reprimand and the Temporary Approval Order for Eric Thacker, EMT was approved (Dr. Lindbloom/Unanimous vote) Mr. Christenson abstained

The Open Meetings Complaint filed by Chad Haber resulted in no violations, acceptance of final Finding of Fact and Conclusions of Law will be provided to the Board when available.

The Board received correspondence between the SD Medical Association (SDSMA) and Department of Labor.

Dr. Robert L. Ferrell, President of the Board, announced that this was his last meeting due to term limitations and he was publicly thanked by Mr. Burchill and the entire Board for his service on the Board.

The staff was instructed during the September meeting to find one meeting per year that could be a two day meeting, and to set the 2014 and 2015 dates using a standard meeting date such as the second Thursday of a meeting month. Proposed dates were presented for 2014 and 2015. The next Board meeting is scheduled for March 27 and 28, 2013.

There being no further business, the meeting adjourned.